



Compliance: By signing this application, I agree to:

- 1) Follow the procedures and guidelines.
- 2) Comply with the decisions of the judges.
- 4) Submit a signed release form for all applicants and participants in your video.

**Application Form for the
2013 Flute Studio Breath-Building Competition**

Teacher/professor's name _____

Street _____

City, state and zip code _____

Telephone _____

Email _____

Approximate number of students who will be participating in the breath-building competition. _____

Signature and date _____

Send or postmarked by January 21st , 2013

**Blocki Flute Breath-Building Competition
5368 Hardt Road
Gibsonia, PA 15400**

Fax: 724-443-3962

Email: mblocki@blockiflute.com